AUG 16 2006

Date

August 16, 2006

08-17-06

Drug B

7			00			
Sone Fr.			. .			
Hoder the Panerwood	k Reduction Act of 1995, no pers	sons are required to res	U.S. Patent and Tradem	PTO/SB/21 (09-04 oved for use through 07/31/2006. OMB 0651-003 mark Office; U.S. DEPARTMENT OF COMMERCE nation unless it displays a valid OMB control number		
onder the Faperwon	K Neducijon Act of 1000, no pen		Application Number	10/635117-Conf. #2070		
TRANSMITTAL FORM			Filing Date	August 6, 2003		
			First Named Inventor	Daniel E. Couto		
(to be us	(to be used for all correspondence after initial filing)			1653		
(.0.50.00				R. B. Mondesi		
Total Numbe	Total Number of Pages in This Submission 6			G0744.70027US01		
	EN	ICLOSURES	(Check all that app	ply)		
X Fee Trans	mittal Form	Drawing(s)		After Allowance Communication to TC		
X Fee	Attached	Licensing-related Papers		Appeal Communication to Board of Appeals and Interferences		
Amendme	nt/Reply	Petition		X Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)		
Afte	r Final	Petition to Convert to a Provisional Application		Proprietary Information		
Affid	lavits/declaration(s)		rney, Revocation rrespondence Address	Status Letter		
X Extension	of Time Request	Terminal Disclaimer		X Other Enclosure(s) (please Identify below):		
Express A	bandonment Request	Request for	Refund	Return Receipt Postcard		
Informatio	n Disclosure Statement	CD, Number	of CD(s)			
Certified Copy of Priority Document(s)		Landso	cape Table on CD			
Reply to Missing Parts/ Incomplete Application		Remarks	 			
Rep	ly to Missing Parts under					
37 0	CFR 1.52 or 1.53					
	SIGNAT	URE OF APPLICA	ANT, ATTORNEY, OF	R AGENT		
Firm Name	WOLF, GREENFIE	LD & SACKS, P.	C.			
Signature	Merleal (. Ponis	2	: # *		
Printed name	Michael J. Pomiane	k		177		

Express Mail Label No. EV717202519US	Certificate of Express Mailing Under 37 CFR 1.10 Dated:	

Reg. No.

46,190

Complete if Known

PTO/SB/17 (12-04v2)

Approved for use through 7/31/2006. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

Fees pursuant to the Consolid	10 18).	Application Num	ipei i	10/033117-00	JIII. #LUIU					
FEE TRANSMITTAL For FY 2005				Filing Date	August 6, 2003					
				First Named Inv		Daniel E. Couto				
				Examiner Name	F	R. B. Mondesi				
X Applicant claims small entity status. See 37 CFR 1.27				Art Unit	1	1653				
TOTAL AMOUNT OF PAYMENT (\$) 760.00				Attorney Docket	Oocket No. G0744.70027US01					
METHOD OF PAYME	NT (check all t	that apply)								
Check Credit Card Money Order None Other (please identify):										
X Deposit Account Deposit Account Number: 23/2825 Deposit Account Name: Wolf, Greenfield & Sacks, P.C.										
For the above-ide	ntified deposit	account, the Dire	ector is	hereby authorize	d to: (chec	k all that apply)				
<u> </u>	s) indicated be					icated below, ex	cept for t	he filing fee		
Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 X Credit any overpayments										
FEE CALCULATION										
1. BASIC FILING, SEARC	H, AND EXA	MINATION FEES	3							
	FILIN	G FEES	SEA	RCH FEES Small Entity	EXAMIN	ATION FEES Small Entity				
Application Type	Fee (\$)	Small Entity Fee (\$)	Fee (\$)		Fee (\$)	Fee (\$)	Fees F	Paid (\$)		
Utility	300	150	500	250	200	100				
Design	200	100	100	50	130	65				
Plant	200	100	300	150	160	80				
Reissue	300	150	500	250	600	300				
Provisional	200	100	0	0	0	0				
2. EXCESS CLAIM FEES							5 (A)	Small Entity		
Fee Description	1 D					•	Fee (\$)	Fee (\$)		
Each claim over 20 (including Reissues) 50 25 Each independent claim over 3 (including Reissues) 200 100										
Multiple dependent claim	•	ing Reissues)					360	100 180		
· -		Foo (\$)	Foo P	aid (\$)	Mı	ıltiple Depende				
TOTAL CIAINS	X	Fee (\$) =	1001	<u>Fee (\$)</u>			Fee Paid (\$)			
				· · · · · · · · · · · · · · · · · · ·				<u>-</u>		
Indep. Claims Extra		Fee (\$)	Fee P	Paid (\$)						
- =	× _	- -								
3. APPLICATION SIZE FE If the specification and d listings under 37 CFF	rawings exceed 1.52(e)), the	application size	fee due	e is \$250 (\$125 f				0		
sheets or fraction the			•			5.		D-1.4 (A)		
	Extra Sheets	Number of /50		Iditional 50 or frac (round up to a who			<u>Fee l</u> =	<u>Paid (\$)</u>		
4. OTHER FEE(S)					·		Fees	Paid (\$)		
Non-English Specifica	tion, \$130 fe	e (no small entit	y disco	ount)						
Other (e.g., late filing surcharge): 2253 Extension for response within third month 510.00 2401 Notice of appeal 250.00										
SUBMITTED BY								<u></u>		
Signature Mad	11.	Ponus		Registration No. (Attorney/Agent)	46,190	Telephone	(617) 64	6-8000		
Name (Print/Type) Michael	J. Pontjanel	7/		7.0	· · ·	Date	August 1	6, 2006		